

P12000050897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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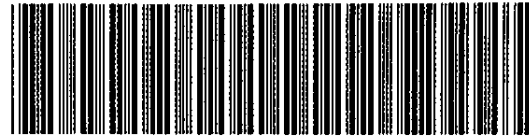
(Business Entity Name)

(Document Number)

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FILED  
SECTION 17.00.00.00  
DIVISION OF CORPORATIONS  
12 JUN -1 AM 7:23

5/7

W12000025204

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Loebelenz Consulting  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Ellen Loebelenz

Name (Printed or typed)

1958 NW 79th Way

Address

Pembroke Pines, FL 33024

City, State & Zip

954-962-8409

Daytime Telephone number

ellen.loebelenz@gmail.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

12 JUN -1 AM 11:59

DIVISION OF CORPORATIONS

May 7, 2012

ELLEN LOBELENZ  
1958 NW 79TH WAY  
PEMBROKE PINES, FL 33024

SUBJECT: LOEBELENZ CONSULTING  
Ref. Number: W12000025204

We have received your document for LOEBELENZ CONSULTING and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 212A00013655

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Loebelenz Consulting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1958 NW 79th Way  
Pembroke Pines, FL 33024

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Assisting with community  
outreach. Marketing

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ellen Loebelenz, President

Address: 1958 NW 79th Way  
Pembroke Pines, FL 33024

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Ellen Loebelenz  
Address: 1958 NW 79th Way  
Pembroke Pines, FL 33024

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Ellen Loebelenz  
Address: 1958 NW 79th Way  
Pembroke Pines, FL 33024

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*Ellen Loebelenz*

Required Signature/Registered Agent

5/1/2012  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*Ellen Loebelenz*

Required Signature/Incorporator

5/1/2012  
Date

FILED  
SECTION 607.01(2), F.S.  
12 JUN - 1 AM 7:23